

UNITED STATES BANKRUPTCY COURT
DISTRICT OF OREGON

In re)	Case No. <u>19-31886-dwh11</u>
)	
Vahan M. Dinihanian, Jr.,)	Notice of Debtor's
)	Amendment of Mailing List or
Debtor(s))	Schedules D, E, F, E/F, G, or H

1. Filing Instructions for Debtor(s)

- A. File this form to add or delete creditors from the mailing list and/or Official Forms (OF) Schedules D, E, F, E/F, G or H, or change the amount or classification of a debt listed on Schedules D, E, F and/or E/F. An amendment filing fee is required.
- B. If filing in paper, include a creditor mailing list with only the new or deleted creditors listed in the format set forth on Local Bankruptcy Form (LBF) 104. Be sure to label each set of changes (i.e., "Add", "Delete", etc.).
- C. If amending Schedules D, E, F, E/F, G or H, label them as "Supplemental" and include only the new information, and file them with this notice.
- D. If amending Schedules D, E, F or E/F, file OF B 106Sum for individual debtors, or OF B 206Sum for non-individual debtors.
- E. If the case is closed, file a separate motion to reopen with the applicable filing fee.
- F. To file an address change for a previously listed creditor, use LBF 101C instead of this form.

2. Service Instructions for Debtor(s)

- A. When adding creditors, serve each new creditor with this notice, and a copy of any of the following documents that have already been filed in this case:
 - 1. The notice of meeting of creditors (i.e., notice of bankruptcy case) that includes all 9 digits of any Social Security Number (SSN) or Individual Taxpayer Identification Number (ITIN).
 - 2. Each applicable amended schedule.
 - 3. When the time for filing a timely proof of claim or complaint under 11 U.S.C. § 523(c) or § 727 has expired, a separate notification that adding the creditor may not result in discharge of the debt. You must create this notification.
 - 4. Chapter 7 or 11: Any order fixing time for filing a proof of claim form.

5. Chapter 9, 11, 12, or 13:

- The notice of any pending confirmation hearing, all related documents sent with that notice and, in a chapter 13 case, the most recent proposed plan; or
- The most recent confirmation order, the most recent confirmed plan, and, if a confirmed chapter 11 plan, the approved disclosure statement.

6. Chapter 11, 12 or 13: Any notice of modification of plan, including attachments, if time for objection has not expired.

7. Chapter 9 or 11:

- The names and addresses of the chairperson and any attorney for each official committee of creditors or equity security holders.
- The notice of any pending hearing on a disclosure statement, with attachments.

B. When deleting creditors, changing a creditor status (e.g., nondisputed to disputed), or reducing a creditor's claim, serve each affected creditor with this notice, the applicable amended schedule(s), and the following:

1. A notice to each deleted creditor that:

- the creditor is being deleted and will not receive any further notices; and
- if time has been fixed to file a proof of claim, the creditor should contact the creditor's attorney with any claims questions.

2. Chapter 9 or 11: A notice to each affected creditor that a proof of claim must be filed by the later of (a) 30 days from the service date of this notice, or (b) the latest time fixed by the court.

3. Certificate of Compliance

The undersigned debtor or debtor's attorney certifies that: (A) all applicable requirements above have been completed; and (B) the attachments are true and correct or were individually verified by the debtor(s).

Dated: 09/17/2019

/s/ Nicholas J. Henderson

Signature

Nathan J. Henderson (503) 417-0500

Type or Print Signer's Name and Phone No.

237 NW Skyline Blvd. Portland, OR 97210 #0871

Debtor's Address & Taxpayer ID#(s) (last 4 digits)

Fill in this information to identify your case:

Debtor 1 **Vahan M. Dinihanian, Jr.**
 First Name Middle Name Last Name

Debtor 2
 (Spouse if, filing) First Name Middle Name Last Name

United States Bankruptcy Court for the: **DISTRICT OF OREGON**

Case number **19-31886**
 (if known)

☒ Check if this is an amended filing

Official Form 106Sum**Summary of Your Assets and Liabilities and Certain Statistical Information**

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

Part 1: Summarize Your Assets

Your assets
 Value of what you own

1. **Schedule A/B: Property** (Official Form 106A/B)
- 1a. Copy line 55, Total real estate, from Schedule A/B..... \$ **1,000,000.00**
- 1b. Copy line 62, Total personal property, from Schedule A/B..... \$ **21,234,782.65**
- 1c. Copy line 63, Total of all property on Schedule A/B..... \$ **22,234,782.65**

Part 2: Summarize Your Liabilities

Your liabilities
 Amount you owe

2. **Schedule D: Creditors Who Have Claims Secured by Property** (Official Form 106D)
- 2a. Copy the total you listed in Column A, *Amount of claim*, at the bottom of the last page of Part 1 of Schedule D... \$ **2,536,980.00**
3. **Schedule E/F: Creditors Who Have Unsecured Claims** (Official Form 106E/F)
- 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F..... \$ **500.00**
- 3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F..... \$ **976,694.00**

Your total liabilities \$ **3,514,174.00**

Part 3: Summarize Your Income and Expenses

4. **Schedule I: Your Income** (Official Form 106I)
 Copy your combined monthly income from line 12 of Schedule I..... \$ **4,500.00**
5. **Schedule J: Your Expenses** (Official Form 106J)
 Copy your monthly expenses from line 22c of Schedule J..... \$ **4,202.00**

Part 4: Answer These Questions for Administrative and Statistical Records

6. Are you filing for bankruptcy under Chapters 7, 11, or 13?
- ☐ No. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.
- ☒ Yes
7. What kind of debt do you have?
- ☒ Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.
- ☐ Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

Official Form 106Sum **Summary of Your Assets and Liabilities and Certain Statistical Information**

page 1 of 2

Debtor 1 **Vahan M. Dinihanian, Jr.**

Case number (if known) **19-31886**

8. **From the Statement of Your Current Monthly Income:** Copy your total current monthly income from Official Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14. \$ **4,500.00**
9. **Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:**

From Part 4 on Schedule E/F, copy the following:

Total claim

9a. Domestic support obligations (Copy line 6a.)	\$ 500.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$ 0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$ 0.00
9d. Student loans. (Copy line 6f.)	\$ 0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$ 0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$ 0.00
9g. Total. Add lines 9a through 9f.	\$ 500.00

Fill in this information to identify your case:

Debtor 1 **Vahan M. Dinihanian, Jr.**
First Name Middle Name Last Name
Debtor 2
(Spouse if, filing) First Name Middle Name Last Name

United States Bankruptcy Court for the: DISTRICT OF OREGON

Case number **19-31886**
(if known)

☒ Check if this is an amended filing

Official Form 106E/F**Schedule E/F: Creditors Who Have Unsecured Claims****12/15**

Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on Schedule A/B: Property (Official Form 106A/B) and on Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G). Do not include any creditors with partially secured claims that are listed in Schedule D: Creditors Who Have Claims Secured by Property. If more space is needed, copy the Part you need, fill it out, number the entries in the boxes on the left. Attach the Continuation Page to this page. If you have no information to report in a Part, do not file that Part. On the top of any additional pages, write your name and case number (if known).

Part 1: List All of Your PRIORITY Unsecured Claims

1. Do any creditors have priority unsecured claims against you?

☐ No. Go to Part 2.

☒ Yes.

2. List all of your priority unsecured claims. If a creditor has more than one priority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. If a claim has both priority and nonpriority amounts, list that claim here and show both priority and nonpriority amounts. As much as possible, list the claims in alphabetical order according to the creditor's name. If you have more than two priority unsecured claims, fill out the Continuation Page of Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3.

(For an explanation of each type of claim, see the instructions for this form in the instruction booklet.)

		Total claim	Priority amount	Nonpriority amount	
21	IRS Priority Creditor's Name Centralized Insolvency Operation PO Box 7346 Philadelphia, PA 19101 Number Street City State Zip Code Who incurred the debt? Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Last 4 digits of account number When was the debt incurred? As of the date you file, the claim is: Check all that apply <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Type of PRIORITY unsecured claim: <input type="checkbox"/> Domestic support obligations <input checked="" type="checkbox"/> Taxes and certain other debts you owe the government <input type="checkbox"/> Claims for death or personal injury while you were intoxicated <input type="checkbox"/> Other. Specify	\$0.00	\$0.00	\$0.00

Debtor 1 **Vahan M. Dinihanian, Jr.**

Case number (if known)

19-31886

2.2	ODR Priority Creditor's Name Attn: Bankruptcy Unit 955 Center St. NE Salem, OR 97301 Number Street City State Zip Code Who incurred the debt? Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Last 4 digits of account number \$0.00 \$0.00 \$0.00 When was the debt incurred? As of the date you file, the claim is: Check all that apply <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Type of PRIORITY unsecured claim: <input type="checkbox"/> Domestic support obligations <input checked="" type="checkbox"/> Taxes and certain other debts you owe the government <input type="checkbox"/> Claims for death or personal injury while you were intoxicated <input type="checkbox"/> Other. Specify
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2.3	Tasha L. Teherani-Ami, fka Dinihanian Priority Creditor's Name 1133 NW 92nd Ave. Portland, OR 97229 Number Street City State Zip Code Who incurred the debt? Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Last 4 digits of account number \$500.00 \$500.00 \$0.00 When was the debt incurred? As of the date you file, the claim is: Check all that apply <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Type of PRIORITY unsecured claim: <input checked="" type="checkbox"/> Domestic support obligations <input type="checkbox"/> Taxes and certain other debts you owe the government <input type="checkbox"/> Claims for death or personal injury while you were intoxicated <input type="checkbox"/> Other. Specify
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Child Support**Part 2: List All of Your NONPRIORITY Unsecured Claims**

3. Do any creditors have nonpriority unsecured claims against you?

☐ No. You have nothing to report in this part. Submit this form to the court with your other schedules.☒ Yes.

4. List all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim. If a creditor has more than one nonpriority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims already included in Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. If you have more than three nonpriority unsecured claims fill out the Continuation Page of Part 2.

Total claim

4.1 **Bank of America**
Nonpriority Creditor's Name
4909 Savarese Circle
Fl1-908-01-50
Tampa, FL 33634
Number Street City State Zip Code
Who incurred the debt? Check one.
☒ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another
☐ Check if this claim is for a community debt
Is the claim subject to offset?
☒ No
☐ Yes

Last 4 digits of account number **0501** **\$0.00**
Opened **8/03/15** Last Active
When was the debt incurred? **5/22/19**
As of the date you file, the claim is: Check all that apply
☐ Contingent
☐ Unliquidated
☐ Disputed
Type of NONPRIORITY unsecured claim:
☐ Student loans
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
☐ Debts to pension or profit-sharing plans, and other similar debts
☒ Other. Specify **Credit Card**

4.2 **Chase Card Services**
Nonpriority Creditor's Name
Attn: Bankruptcy
Po Box 15298
Wilmington, DE 19850
Number Street City State Zip Code
Who incurred the debt? Check one.
☒ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another
☐ Check if this claim is for a community debt
Is the claim subject to offset?
☒ No
☐ Yes

Last 4 digits of account number **9688** **\$0.00**
Opened **6/08/99** Last Active
When was the debt incurred? **5/22/19**
As of the date you file, the claim is: Check all that apply
☐ Contingent
☐ Unliquidated
☐ Disputed
Type of NONPRIORITY unsecured claim:
☐ Student loans
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
☐ Debts to pension or profit-sharing plans, and other similar debts
☒ Other. Specify **Credit Card**

4.3 **Columbia Bank**
Nonpriority Creditor's Name
Attn: Hadley Robbins, CEO
1301 A St #800
Tacoma, WA 98402
Number Street City State Zip Code
Who incurred the debt? Check one.
☐ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☒ At least one of the debtors and another
☐ Check if this claim is for a community debt
Is the claim subject to offset?
☒ No
☐ Yes

Last 4 digits of account number **\$976,694.00**
When was the debt incurred?
As of the date you file, the claim is: Check all that apply
☒ Contingent
☐ Unliquidated
☐ Disputed
Type of NONPRIORITY unsecured claim:
☐ Student loans
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
☐ Debts to pension or profit-sharing plans, and other similar debts
☒ Other. Specify **Personal Guaranty**

Debtor 1 **Vahan M. Dinihanian, Jr.**Case number (if known) **19-31886**

4 4 **Columbia Credit Union** Last 4 digits of account number **7201** \$0.00
 Nonpriority Creditor's Name
Attn: Bankruptcy
Po Box 324
Vancouver, WA 98666
 Number Street City State Zip Code
 Who incurred the debt? Check one.
☒ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another
☐ Check if this claim is for a community debt
 Is the claim subject to offset?
☒ No
☐ Yes

When was the debt incurred? **Opened 04/15 Last Active 8/09/18**

As of the date you file, the claim is: Check all that apply

☐ Contingent
☐ Unliquidated
☐ Disputed
 Type of NONPRIORITY unsecured claim:
☐ Student loans
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
☐ Debts to pension or profit-sharing plans, and other similar debts
☒ Other. Specify **Automobile**

4 5 **Synco/ppc** Last 4 digits of account number **6341** \$0.00
 Nonpriority Creditor's Name
Po Box 530975
Orlando, FL 32896
 Number Street City State Zip Code
 Who incurred the debt? Check one.
☒ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another
☐ Check if this claim is for a community debt
 Is the claim subject to offset?
☒ No
☐ Yes

When was the debt incurred? **Opened 06/19 Last Active 7/26/19**

As of the date you file, the claim is: Check all that apply

☐ Contingent
☐ Unliquidated
☐ Disputed
 Type of NONPRIORITY unsecured claim:
☐ Student loans
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
☐ Debts to pension or profit-sharing plans, and other similar debts
☒ Other. Specify **Charge Account**

Part 3: List Others to Be Notified About a Debt That You Already Listed

5. Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

		Total Claim	
Total claims from Part 1	6a. Domestic support obligations	6a. \$	500.00
	6b. Taxes and certain other debts you owe the government	6b. \$	0.00
	6c. Claims for death or personal injury while you were intoxicated	6c. \$	0.00
	6d. Other. Add all other priority unsecured claims. Write that amount here.	6d. \$	0.00
	6e. Total Priority. Add lines 6a through 6d.	6e. \$	500.00
Total claims from Part 2	6f. Student loans	6f. \$	0.00
	6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g. \$	0.00

Debtor 1 **Vahan M. Dinihanian, Jr.**

Case number (if known) **19-31886**

- 6h. **Debts to pension or profit-sharing plans, and other similar debts**
- 6i. **Other.** Add all other nonpriority unsecured claims. Write that amount here.
- 6j. **Total Nonpriority.** Add lines 6f through 6i.

6h.	\$	0.00
6i.	\$	976,694.00
6j.	\$	976,694.00

Fill in this information to identify your case:

Debtor 1 **Vahan M. Dinihanian, Jr.**

First Name

Middle Name

Last Name

Debtor 2

(Spouse if filing)

First Name

Middle Name

Last Name

United States Bankruptcy Court for the: **DISTRICT OF OREGON**

Case number **19-31886**

(if known)

☒ Check if this is an amended filing

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

1. Do you have any executory contracts or unexpired leases?

☐ No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.

☒ Yes. Fill in all of the information below even if the contacts of leases are listed on *Schedule A/B:Property* (Official Form 106 A/B).

2. List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

Person or company with whom you have the contract or lease
Name, Number, Street, City, State and ZIP Code

State what the contract or lease is for

2.1 **15005 NW Cornell LLC
237 NW Skyline Blvd.
Portland, OR 97210**

Operating Agreement; Debtor is Manager. Listed as an executory contract out of an abundance of caution.

2.2 **Eagle Holdings LLC
237 NW Skyline Blvd.
Portland, OR 97210**

Month to Month Lease of a Portion of Personal Residence (Shop, Barns, Etc.)

2.3 **Envisiontec, Inc.
15162 S Commerce Dr
Dearborn, MI 48120**

Lease of ULTRA 3SP 3D Printer

Fill in this information to identify your case:

Debtor 1 **Vahan M. Dinihanian, Jr.**

First Name

Middle Name

Last Name

Debtor 2

(Spouse if, filing)

First Name

Middle Name

Last Name

United States Bankruptcy Court for the: **DISTRICT OF OREGON**

Case number **19-31886**

(if known)

☐ Check if this is an amended filing

Official Form 106Dec

Declaration About an Individual Debtor's Schedules

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Sign Below

Did you pay or agree to pay someone who is NOT an attorney to help you fill out bankruptcy forms?

☒ No

☐ Yes. Name of person

Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119)

Under penalty of perjury, I declare that I have read the summary and schedules filed with this declaration and that they are true and correct.

X /s/ Vahan M. Dinihanian, Jr.

Vahan M. Dinihanian, Jr.

Signature of Debtor 1

X

Signature of Debtor 2

Date **September 16, 2019**

Date

Bank of America
4909 Savarese Circle
Fl1-908-01-50
Tampa, FL 33634

Chase Card Services
Attn: Bankruptcy
Po Box 15298
Wilmington, DE 19850

Syncb/ppc
Po Box 530975
Orlando, FL 32896

Vahan IV NW Tenth LLC
237 NW Skyline Blvd
Portland, OR 97006